24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 16 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Working America Coalition	
	C C00620583
Check if 24-hour report	t filed on
Full Name of Payee	Date of Public Distribution/Dissemination
Mosaic	09 16 2016
Mailing Address 4801 Viewpoint Place	Amount
City State Zip Code	270.00
Cheverly MD 20781	Transaction ID : D599652 Date of Disbursement or Obligation
Purpose of Expenditure Fliers Category/ Type 004	09 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Rodham Clinton, Hillary, , ,	resident Senate State:
Calcillati Total To Bato	Disbursement For: Primary General Other (specify)
Full Name of Payee Mosaic	Date of Public Distribution/Dissemination
	09 18 2016
Mailing Address 4801 Viewpoint Place	Amount
City State Zip Code	30.00
Cheverly MD 20781	Transaction ID : D599924 Date of Disbursement or Obligation
Purpose of Expenditure Fliers Category/ Type 004	09 / 21 / Y 2016
Name of Federal Candidate Support	Office Sought: House District:
TRUMP, DONALD, J., , Oppose	resident Senate State:
	Disbursement For: Primary
(a) CURTOTAL of Harrison Indonesia Franciski was	
(a) SUBTOTAL of Itemized Independent Expenditures	300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
King, Crystal, , , [Electronically Filed] Date	10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	